

COVINGTON COUNTY JAIL  
INMATE REQUEST/GRIEVANCE FORM

NAME Al Bayett BLOCK: C DATE: 8-30-05

TELEPHONE CALL CUSTODY CHANGE ( ) PERSONAL PROBLEM

SPECIAL REQUEST ( ) TIME SHEET ( ) OTHER ( ) GRIEVANCE

BRIEFLY OUTLINE YOUR REQUEST/ GRIEVANCE. THEN PRESENT TO C/O

IF REQUEST PLEASE CHECK TO WHOM IT IS DIRECTED TO:

SHERIFF ☒ CHIEF JAILER ( ) JAILER ( ) RECORDS OFFICE ( ) CHAPLAIN

IF GRIEVANCE STATE PARTIES INVOLVED AND NAMES OF WITNESSES IF APPLICABLE.

Nurse Mitchell refuses to see me because  
I have a sore bump on my butt this is  
the second time she has refused to treat  
me the first was with Dr McWorter I  
can't understand how they can refuse to treat  
me when it's there now

Thank you

DO NOT WRITE BELOW THIS LINE -- FOR REPLY ONLY:

APPROVED ( ) DENIED ( ) PAY PHONE ( ) COLLECT ( ) OTHER

I will speak to her about this situation

[Signature]

8-22-05

I Al Boyett I'm writting this letter to  
sheriff Anthony Clark

Anthony Clark sir,

I am serving time for volation of probation  
I have a medical condition known as (Hippituss  
C.) and need medication on daily bases and  
have been denied by Dr McWhorter the jail  
doctor and request counsel to file a motion  
for medical attention

Thank you.

Al Boyett

Serving the nurse  
today 9-25-2005 LB.

Anthony Clark sir.

8-30-05

I Al Boyett Am writting you this Letter in concern of Nurse Mithell I Ask her to Look at some sores breaking out on my hip And she said that she would not look at my rear I thought that was there job to see what the problem was so that they could solve it if posible this is the second time I have had problem's with her and Dr Mewhorter first with the (Hippitituss C now this) I need medical attention And fill if they can't do it we need to find someone who can or maybe I could go up the road so I no I will be taken care of.

Thank you  
Al Boyett

This is being taken care of & looked into as of now

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